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Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	
Case number (if known)	Chapter you are filing under:
	Chapter 7 Chapter 11
	Chapter 12 Chapter 13

#### Official Form 101

#### Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself	Part 1: Identify Yourself						
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):					
Your full name	Ruth First name	First name					
Write the name that is on your government-issued picture identification (for example, your driver's							
	Middle name  Chambers	Middle name					
license or passport	Last name	Last name					
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)					
2. All other names you							
have used in the last 8 years	First name	First name					
Include your married or	Middle name	Middle name					
maiden names.	Last name	Last name					
	First name	First name					
	Middle name	Middle name					
	Last name	Last name					
3. Only the last 4 digits of your Social	XXX - XX2387	XXX - XX-					
Security number or federal Individual	OR	OR					
Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-					

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De	First Name	Middle Name Last Name	Case number (if known)
	THOUTAING	missio name	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
	Identification Numbers (EIN) you have used in the last	Business name	Business name
	8 years	Business name	Business name
	Include trade names and doing business as names	EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		14904 Cicero Ave. Apt. 403 Number Street	Number Street
		Oak Forest Illinois 60452	
		City State Zip Code Cook	City State Zip Code
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		nouses to you at the maining address.	
		Number Street	Number Street
		City State Zip Code	City State Zip Code
_		City State Zip Code	City State Zip Code
6.	Why you are choosing this district	Check one:	Check one:
	to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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Debtor 1 Ruth Chambers Case number (if known) First Name Last Name Part 2: **Tell the Court About Your Bankruptcy Case** 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy Code you Bankruptcy (Form B2010)). Also, go to the top of page 1 and check the appropriate box. are choosing to file Chapter 7 under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for fee more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for ✓ No. bankruptcy within the last 8 years? Yes. District MM / DD / YYYY When District Case number District Case number MM / DD / YYYY 10. Are any bankruptcy ✓ No. cases pending or being filed by a Relationship to you Yes. Debtor spouse who is not When District Case number, if known filing this case with you, or by a business Relationship to you Debtor partner, or by an District Case number, if known affiliate? MM / DD / YYYY 11. Do you rent your No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you? ✓ No. Go to line 12. Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

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Debtor 1 Ruth Chambers Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are vou a small business debtor? I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ✓ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Ruth Chambers Case number (if known) First Name Middle Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. My physical disability causes me to Disability. My physical disability causes me to be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for

waiver of credit counseling with the court.

about credit counseling, you must file a motion for

waiver of credit counseling with the court.

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Debtor 1 Ruth	Cham		per (if known)
First Name	Middle Name Last N estions for Reporting Purposes	ame	
Part 6: Answer These Que 16. What kind of debts do you have?	16a. Are your debts primarily cor "incurred by an individual prir No. Go to line 16b.  Yes. Go to line 17.  16b. Are your debts primarily bus	marily for a personal, family, on the same of the same	eare debts that you incurred to obtain on of the business or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that funds  No.		empt property is excluded and administrative unsecured creditors?
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 mill \$100,000,001-\$500 mill	on \$1,000,000,001-\$10 billion lion \$10,000,000,001-\$50 billion
20. How much do you estimate your liabilities to be?  Part 7: Sign Below	▼ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 millior \$10,000,001-\$50 millior \$50,000,001-\$100 mill \$100,000,001-\$500 million	on \$1,000,000,001-\$10 billion lion \$10,000,000,001-\$50 billion
For you	correct.  If I have chosen to file under Chapt of title 11, United States Code. I un under Chapter 7.  If no attorney represents me and I cout this document, I have obtained I request relief in accordance with the I understand making a false statement.	er 7, I am aware that I may producerstand the relief available unlid not pay or agree to pay sor and read the notice required the chapter of title 11, United Sent, concealing property, or old can result in fines up to \$250 9, and 3571.	ary that the information provided is true and acceed, if eligible, under Chapter 7, 11,12, or 1 ander each chapter, and I choose to proceed meone who is not an attorney to help me fill by 11 U.S.C. § 342(b).  States Code, specified in this petition. btaining money or property by fraud in 1,000, or imprisonment for up to 20 years, or mature of Debtor 2 ecuted on

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Debtor 1 Ruth		Chambers	Case number (if	f known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed un	der Chapter 7, 11, 12,	or 13 of title 11, Unite	nave informed the debtor(s) about ad States Code, and have explained the also certify that I have delivered to the
If you are not		-		which § 707(b)(4)(D) applies, certify that I
represented by an	. ,			dules filed with the petition is incorrect.
attorney, you do not	•	· carqay areat are		and man the pennenne meetical
need to file this page.	/s/ David Strahorn		Date	8/6/2018
	Signature of Attorney	for Debtor		MM / DD / YYYY
	. 5			
	David Strahorn			
	Printed name			
	Semrad Law Firm			
	Firm name			
	11101 S. Western Ave	onuo		
	Street	silue		
	Chicago		Illinois	60643
	City		State	Zip Code
	Contact phone	3128374022	Email address	dstrahorn@semradlaw.com
			-	
			Illinois	3
	Bar number		State	

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Fill in this information to identify your case:								
Debtor 1	Ruth		Chambers					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States E	Bankruptcy Court for the:	Northern	District of Illinois					
			(State)					
Case number								
(If known)								

Check if this is an
amended filing

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	\$0.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$9,955.00
1b. Copy line 62, Total personal property, from Schedule A/B	¢0.055.00
1c. Copy line 63, Total of all property on Schedule A/B	\$9,955.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	¢12.202.00
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$12,303.00 —————————————————————————————————
. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$10.916.50
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$12,816.50 
Your total liabilities	\$25,119.50
Part 3: Summarize Your Income and Expenses	
arc. Cammarizo roa. moomo ana zaponece	
	\$2,006.00
. Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I	

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Debtor 1 Ruth Chambers Case number (if known) First Name Middle Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  $\square$ 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$0.00 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: **Total claim** From Part 4 on Schedule E/F, copy the following: \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$0.00

9g. Total. Add lines 9a through 9f.

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Fill in this	information to identify your	case:				
Debtor 1	Ruth			Chambers		
Debtor 2	First Name	Middle N	ame	Last Name		
(Spouse, if fi	ling) First Name	Middle N	ame	Last Name		
United Sta	ates Bankruptcy Court for the:	Northern		District of Illinois		
Case num	ber			(State)		
Officia	I Form 106A/B					Check if this is an amended filing
Sche	dule A/B: Prope	erty				12/1
category v responsibl write your	where you think it fits best. e for supplying correct info name and case number (if	Be as complete a rmation. If more s known). Answer e	nd accur pace is n very que:	set only once. If an asset fits in more rate as possible. If two married peop needed, attach a separate sheet to t stion. ther Real Estate You Own or H	ole are filing together, both this form. On the top of any	are equally
1. Do you		quitable interest i	n any re	sidence, building, land, or similar pr	operty?	
	No. Go to Part 2  Yes. Where is the property?					
1.1	Street address, if available, or	other description	Sing	s the property? Check all that apply. gle-family home plex or multi-unit building	the amount of any sec	I claims or exemptions. Put ured claims on <i>Schedule D:</i> laims Secured by Property.
			Cor Mar	ndominium or cooperative nufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
	Number Street  City State	Zip Code		estment property eshare	Describe the nature interest (such as fee the entireties, or a li	simple, tenancy by
	·	·	one.  Deb	es an interest in the property? Check otor 1 only otor 2 only otor 1 and Debtor 2 only east one of the debtors and another		ommunity property )
				nformation you wish to add about the	nis item, such as local	
				ty identification number:		
If you	Street address, if available, or		Sing Dup Cor	s the property? Check all that apply. gle-family home plex or multi-unit building adominium or cooperative andactured or mobile home	the amount of any sec	I claims or exemptions. Put ured claims on Schedule D: laims Secured by Property.  Current value of the portion you own?
	Number Street  City State	Zip Code		estment property eshare	Describe the nature interest (such as fee the entireties, or a li	simple, tenancy by
		·	one.  Deb Deb At le	otor 1 only otor 2 only otor 1 and Debtor 2 only east one of the debtors and another information you wish to add about the	(see instructions	ommunity property )

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Debtor 1			Chambers	Case number	(if known)	
	First Name	Middle Name	Last Name			
1.3Stre	et address, if available, or othe		/hat is the property? Check all that app Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	ply.	the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D:</i> ims Secured by Property.  Current value of the portion you own?
Nun	nber Street State	Zip Code	Land Investment property Timeshare Other		Describe the nature or interest (such as fee s the entireties, or a life	imple, tenancy by
		[ [ [ ]	The has an interest in the property? ( Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoth ther information you wish to add aboreperty identification number:	er	Check if this is co (see instructions)  Such as local	mmunity property
	the dollar value of the porti ve attached for Part 1. Write	on you own for a	II of your entries from Part 1, includi	ng any entries	for pages	
<b>Do you ow</b> you own t	nat someone else drives. If you	ı lease a vehicle, a	in any vehicles, whether they are realls report it on Schedule G: Executory (	-	-	
S. Cars, va		y verncies, motorc	ycies			
3.1	Model: Year:	Nissan Sentra 2012	Who has an interest in the proper one.  Debtor 1 only	ty? Check	the amount of any secu	claims or exemptions. Put irred claims on <i>Schedule D:</i> iims Secured by Property.
	Approximate mileage: Other information: 2012 Nissan Sentra	56000	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and a		Current value of the entire property? \$4675.00	Current value of the portion you own? \$4675.00
3.2	Make Model: Year:		who has an interest in the proper one.  Debtor 1 only		the amount of any secu	claims or exemptions. Put ured claims on <i>Schedule D:</i> nims Secured by Property.
	Approximate mileage: Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and a Check if this is community preinstructions)		Current value of the entire property?	Current value of the portion you own?

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tor 1	Ruth		Chambers C	Case number	(if known)	
	First Name	Middle Name	Last Name		· · · ·	
3.3	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the property: one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and Check if this is community properinstructions)	other	Do not deduct secured the amount of any secu Creditors Who Have Clat  Current value of the entire property?	red claims on Schedule
3.4	Make Model: Year: Approximate mileage:		Who has an interest in the property? one.  Debtor 1 only	? Check	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule ims Secured by Property
	Other information:		Debtor 2 only Debtor 1 and Debtor 2 only		Current value of the entire property?	Current value of the portion you own?
			At least one of the debtors and and			
Exar	nples: Boats, trailers, motors, per		Check if this is community proper instructions)  ecreational vehicles, other vehicles shing vessels, snowmobiles, motorcycles	s, and acces		
Exar		sonal watercraft, fis	instructions) ecreational vehicles, other vehicles	s, and acces le accessories		
Exar	nples: Boats, trailers, motors, per  No  Yes  Make  Model:  Year:  Approximate mileage:	sonal watercraft, fis	instructions)  ecreational vehicles, other vehicles shing vessels, snowmobiles, motorcycles  Who has an interest in the property:  Debtor 1 only  Debtor 2 only	s, and acces le accessories	Do not deduct secured	red claims on Schedule
Exar	nples: Boats, trailers, motors, per  No  Yes  Make  Model:  Year:	sonal watercraft, fis	instructions)  ecreational vehicles, other vehicles shing vessels, snowmobiles, motorcycle  Who has an interest in the property cone.  Debtor 1 only	s, and acces le accessories ? Check	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule ims Secured by Propert Current value of the
Exar	Make Model: Approximate mileage: Other information:  Make Model: Year:  Make Model: Year:	sonal watercraft, fis	instructions)  ecreational vehicles, other vehicles shing vessels, snowmobiles, motorcycle  Who has an interest in the property one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and Check if this is community property.	s, and acces le accessories  Check  Other  erty (see	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule ims Secured by Propention Yellow Of the portion you own?  claims or exemptions. I red claims on Schedule
Exar 4.1	nples: Boats, trailers, motors, per  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:  Make  Model:	sonal watercraft, fis	instructions)  ecreational vehicles, other vehicles shing vessels, snowmobiles, motorcycle  Who has an interest in the property?  One.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and and instructions)  Who has an interest in the property?  One.	s, and acces le accessories  Check  Other  erty (see	Do not deduct secured the amount of any secu Creditors Who Have Cla  Current value of the entire property?  Do not deduct secured the amount of any secu	red claims on Schedule ims Secured by Propertion Value of the portion you own?  claims or exemptions. Fred claims on Schedule

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Debtor 1 Ruth Chambers Case number (if known) First Name Middle Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Living room set financed \$3400.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Cell Phone, Two TVs, Desktop \$1000.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothes** \$150.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Nο Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **✓** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$4950.00 for Part 3. Write that number here ......

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Debtor 1 Ruth Chambers Case number (if known) First Name Middle Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: 17.1. Checking account: Chase Bank \$330.00 17.2. Checking account: 17.3. Savings account: \$0.00 Chase Bank 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ◪ No Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

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Dep.	tor 1 Ruth First Name	Middle Name	Last Name	Case number (if known)	
20.		orate bonds and other negotial include personal checks, cashiers'			
	Non-negotiable instrum				
	<b>✓</b> No				
	Yes. Give specific				
	information about	Issuer name:			
	them				
					-
					<u> </u>
21.	Retirement or pension		thrift aguings accounts	or other penalon or profit charing plans	
		AA, ERISA, Keogii, 40 I(K), 403(D)	, tillit savings accounts, t	or other pension or profit-sharing plans	
	✓ No	Type of account:	Institution name:		
	Yes. List each account	401(k) or similar plan:			
	separately.				
		Pension plan:			-
		IRA:	-		_
		Retirement account:			_
		Keogh:			_
		Additional account:			_
		Additional account:			
22.	Security deposits and	prepayments			-
		d deposits you have made so that with landlords, prepaid rent, public			
	companies, or others	with landiords, prepaid fent, public	dillilles (electric, gas, wat	er), telecommunications	
	✓ No		Institution name:		
	Yes	Electric:			
	_	Gas:			
		Heating oil:			-
		Security deposit on rental unit:			
		Prepaid rent:	-		-
		Telephone:			_
		Water:			
		Rented furniture:			-
		Other:			
23	Annuities (A contract for	or a periodic payment of money to	vou, either for life or for a	number of years)	_
	No No		,,	, ,	
	블	Issuer name and description:			
	Yes				
					-

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Deb <sup>1</sup>	tor 1 Ruth				nber <i>(if known)</i>	
24.			ount in a qualified AB	Name LE program, or under a qualified	l state tuition program.	
	26 U.S.C. §§ 530(b)(1	), 529A(b), and 529(b	)(1).			
	No Instituti	ion name and descript	tion. Separately file the	records of any interests.11 U.S.C.	§ 521(c):	
25.	Trusts, equitable or texercisable for your		operty (other than ar	nything listed in line 1), and righ	ts or powers	
	No No					1
	Yes. Describe					
26.	Patents, copyrights,	trademarks, trade s	secrets, and other int	ellectual property		
				ies and licensing agreements		
	✓ No  Yes. Describe					1
27.	Licenses, franchises	-	-			
	Examples: Building pe	rmits, exclusive licens	es, cooperative associa	ation holdings, liquor licenses, prof	essional licenses	
	Yes. Describe					
	<u> </u>					
Moi	ney or property owe	ed to you?				Current value of the portion you own?  Do not deduct secured claims or exemptions.
28.	Tax refunds owed to y	you				
	✓ No				Federal:	\$0.00
		including whether			State:	\$0.00
		iled the returns rears				
29.					Local:	\$0.00
	Family support					
	Examples: Past due or	lump sum alimony, sլ	oousal support, child s	upport, maintenance, divorce settle	ement, property settlemer	nt
	Examples: Past due or		oousal support, child s	upport, maintenance, divorce settle	ment, property settlemer	\$0.00
	Examples: Past due or		oousal support, child s	upport, maintenance, divorce settle	_	
	Examples: Past due or		oousal support, child s	upport, maintenance, divorce settle	Alimony:	\$0.00
	Examples: Past due or		pousal support, child s	upport, maintenance, divorce settle	Alimony: Maintenance:	\$0.00 \$0.00
	Examples: Past due or		pousal support, child s	upport, maintenance, divorce settle	Alimony:  Maintenance:  Support:	\$0.00 \$0.00 \$0.00
30.	Examples: Past due or Very No Yes. Give specific in	information			Alimony:  Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00
30.	No Yes. Give specific in  Other amounts some Examples: Unpaid wag	one owes you es, disability insurance		penefits, sick pay, vacation pay, wo	Alimony:  Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00
30.	No Yes. Give specific in  Other amounts some Examples: Unpaid wag Social Security  No	one owes you es, disability insurance	e payments, disability b	penefits, sick pay, vacation pay, wo	Alimony:  Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00
30.	No Yes. Give specific in  Other amounts some Examples: Unpaid wag Social Secur	one owes you es, disability insurance	e payments, disability b	penefits, sick pay, vacation pay, wo	Alimony:  Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00

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Deb	tor 1 Ruth	Chambers	Case number (if known)	
	First Name Middle Nam	ne Last Name		
31.	Interests in insurance policies Examples: Health, disability, or life insurance; h	ealth savings account (HSA); credit, ho	omeowner's, or renter's insurance	
	No  ✓ Yes. Name the insurance company	Company name:	Beneficiary:	Surrender or refund value:
	of each policy and list its value	Primerica (Term Policy)	Daughters	\$0.00
32.	Any interest in property that is due you from If you are the beneficiary of a living trust, experproperty because someone has died.		, or are currently entitled to receive	
	✓ No Yes. Describe			
33.	Claims against third parties, whether or no Examples: Accidents, employment disputes, in		demand for payment	
	✓ No Yes. Describe			
34.	Other contingent and unliquidated claims to set off claims	of every nature, including counterc	aims of the debtor and rights	
	No Yes. Describe			
35.	Any financial assets you did not already list	t		
	No Yes. Describe			
36.	Add the dollar value of all of your entries fr for Part 4. Write that number here			\$330.00
Part	5: Describe Any Business-Related Pr	operty You Own or Have an In	terest In. List any real estate in Par	t 1.
	Do you own or have any legal or equitable i			• • •
	No. Go to Part 6.  Yes. Go to line 38.	,		Current value of the portion you own? Do not deduct secured claims
38.	Accounts receivable or commissions you a	Iready earned		or exemptions
	No Yes. Describe			
39.	Office equipment, furnishings, and supplies Examples: Business-related computers, software		chines, rugs, telephones, desks, chairs, elec	tronic devices
	✓ No Yes. Describe			

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Deb	tor 1 Ruth	Chambers	Case number (if known)	
	First Name	Middle Name Last Name		
40.	Machinery, fixtures, equip	oment, supplies you use in business, and tools of your trade		
	<b>✓</b> No			
	Yes. Describe			
41.	Inventory			
	✓ No			
	Yes. Describe			
42.	Interests in partnerships	or joint ventures		
	✓ No			
		Name of entity:	% of ownership:	
	Yes. Give specific information about			
	them			<del></del>
				<del>-</del>
43. (	Customer lists, mailing list	s. or other compilations		-
	—	-,		
	✓ No			
	Yes. Do your lists inclu	de personally identifiable information (as defined in 11 U.S.C. § 1	01(41A))?	
	☐ No			
	Yes. Describe.			
	Too. December			
44.	Any business-related proj	perty you did not already list		
	□ No			
	No			
	Yes. Give specific information			
	imormation			
				<del>_</del>
				<del>_</del>
				<u> </u>
45. A	dd the dollar value of all o	f your entries from Part 5, including any entries for pages yo	ou have attached	
		ere		
<u> </u>	Deceribe Any Form	and Commental Fishing Related Brownst Very Co		
Part	If you own or have an inte	n- and Commercial Fishing-Related Property You Overest in farmland, list it in Part 1.	wn or mave an interest in.	
46.	Do you own or have any l	egal or equitable interest in any farm- or commercial fishing	g-related property?	
	No. Go to Part 7.			Current value of the
				portion you own?
	Yes. Go to line 47.			Do not deduct secured claims or exemptions
17	Farm animals			or exemplions
47.	Examples: Livestock, poulti	y, farm-raised fish		
	✓ No			
	Yes. Describe			

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Debt	or 1 Ruth First Name		Chambers	Case number (if known)	
40		Middle Name	Last Name		
48.	Crops-either growing o	r narvested			
	No				
	Yes. Describe				
49.	Farm and fishing equip	ment, implements, machinery, fixtu	res, and tools of trade		
	<b>✓</b> No				
	Yes. Describe				
50.	Farm and fishing suppli	es, chemicals, and feed			
	<b>✓</b> No				
	Yes. Describe				
51.	Any farm- and commer	cial fishing-related property you did	l not already list		
	<b>✓</b> No				
	Yes. Describe				
		<del></del>			
		of your entries from Part 6, including			
•					
	Danasila All Duas			No. 1 int Alexand	
Part 7		perty You Own or Have an Inter erty of any kind you did not already		NOT LIST ADOVE	
		, country club membership	1130.		
	✓ No				1
	Yes. Give specific				
	information				
					·
-4 4	dd Ab a dallau waloo af all	of very outside from Deut 7 Miles Al	h a t		
54. AC	ad the dollar value of all	of your entries from Part 7. Write th	nat number nere		
Part 8	List the Totals of	Each Part of this Form			
55. <b>P</b>	Part 1: Total real estate,	line 2			
56. <b>p</b>	oart 2 total vehicles, line	± 5	A 4075 00		
-		d household items, line 15	\$4675.00	_	
	•	·	\$4950.00	_	
58. <b>P</b> a	art 4: Total financial ass	ets, line 36	\$330.00	_	
59. <b>P</b>	Part 5: Total business-re	lated property, line 45	- <u></u> -	_	
60. <b>P</b>	Part 6: Total farm- and fi	shing-related property, line 52		_	
61. <b>P</b>	Part 7: Total other prope	rty not listed, line 54			
62. <b>T</b>	otal personal property.	Add lines 56 through 61	\$9955.00	_	+ \$9955.00
			φ9900.00	Copy personal property total	+ ФЗЗОЗ.00
					\$9955.00
63. <b>T</b> c	otal of all property on So	chedule A/B. Add line 55 + line 62			

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Debtor 1	Ruth		Chambers	Case number (if known)	
	Eirct Namo	Middle Name	Last Namo		

#### Schedule A/B: Property. Additional page

Part 3: Describe Your Personal and Household Items							
Do you own or ha	ve any legal or equitable interest in any of the following items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.					
6.2. Household good	ds and furnishings						
No ✓ Yes. Describe	Bedroom Set	\$400.00					

		Case 18-22040	Doc 1 Filed 08	8/06/18 Entered 08/06/18 ment Page 21 of 69	13:32:08 Desc	c Main
Fill	in this inforn	nation to identify your case:				
Deb	otor 1	Ruth		Chambers		
		First Name	Middle Name	Last Name		
	otor 2 use, if filing)	First Name	Middle Name	Last Name		
Uni	ted States Ba	ankruptcy Court for the: Nortl	hern D	istrict of Illinois (State)		
	e number own)					
(II KI						Check if this is an
Of	ficial F	Form 106C				amended filing
		<del></del>	. Vou Oleim e	- F.v		
_		C: The Property		s <b>exempt</b> e are filing together, both are equally		04/16
For stat the tax-und you	each item e a specif amount of exempt re er a law the r exemption t 1: Identification	es, write your name and can of property you claim as ic dollar amount as exemplicable statutory etirement funds—may be not limits the exemption to mould be limited to the lifty the Property You Claim	ase number (if known) s exempt, you must s npt. Alternatively, you v limit. Some exempt unlimited in dollar a so a particular dollar e applicable statutory m as Exempt	pecify the amount of the exemption i may claim the full fair market valutions—such as those for health aids mount. However, if you claim an examount and the value of the proper	n you claim. One way e of the property be rights to receive ce emption of 100% of	y of doing so is to ing exempted up to ertain benefits, and fair market value
1.		re claiming state and federal	-			
		re claiming federal exemptio				
	_	-				
2.	For any pr	operty you list on Schedule A	୩/୭ that you claim as ex	xempt, fill in the information below.		
	Brief desc	ription of the property and	Current value of	Amount of the exemption you claim	Specific laws t	hat allow exemption
		hedule A/B that lists this	the portion you own	Check only one box for each exemption.	Sp33 iu 10 t	
			Copy the value from			

\$330.00

\$0.00

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

 $\overline{\mathbf{V}}$ 

 $\overline{\mathbf{A}}$ 

\$330.00

\$0

100% of fair market value, up to any

100% of fair market value, up to any

applicable statutory limit

applicable statutory limit

Official Form 106C

No Yes

Brief

description:

Line from Schedule A/B:

description:

Line from Schedule A/B:

Bank

Checking account,

Savings account, Chase

Are you claiming a homestead exemption of more than \$160,375?

Chase Bank

735 ILCS 5/12-1001(b)

735 ILCS 5/12-1001(b)

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Debtor 1 Ruth Chambers Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and Current value of Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B 735 ILCS 5/12-1001(b) Brief \$1,000.00 description:  $\checkmark$ \$1,000.00 Cell Phone, Two TVs, 100% of fair market value, up to any Desktop applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(a) Brief \$150.00 description:  $\overline{}$ \$150.00 **Used Clothes** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) \$400.00 description:  $\overline{}$ \$400.00 **Bedroom Set** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 06 735 ILCS 5/12-1001(c); 735 ILCS Brief description: \$4,675.00 5/12-1001(b)  $\checkmark$ Nissan Sentra, 2012, 100% of fair market value, up to any 2012 Nissan Sentra applicable statutory limit I ine from Schedule A/B: 735 ILCS 5/12-1001(f)

\$0.00

**✓** 

100% of fair market value, up to any

applicable statutory limit

description:

Line from

Schedule A/B:

Primerica (Term Policy)

31

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Fill in	this inforr	nation to identify your cas	se:				
Debto	or 1	Duth		Chambers			
Debto	ו זכ	Ruth First Name	Middle Name	Last Name			
Debto	or 2 se, if filing)	E					
		First Name	Middle Name	Last Name			
Unite	d States B	ankruptcy Court for the:	Northern	District of Illinois(State)			
Case (If knov	number vn)			<u> </u>			
Off	icial I	Form 106D					Check if this is a amended filing
Scl	hedu	le D: Credito	ors Who Hav	ve Claims Secure	ed by Prop	erty	12/1
more	space is r	needed, copy the Addition		e are filing together, both are equaler and attach it to t	•		
		number (if known).					
1. I	•	reditors have claims se					
	_			vith your other schedules. You hav	e nothing else to rep	ort on this form.	
	✓ Yes. I	Fill in all of the information	below.				
Part	1: List A	All Secured Claims					
2.	separatel	•	an one creditor has a part	ured claim, list the creditor icular claim, list the other creditors order according to the creditor's	Column A  Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	Santande	er Consumer USA			\$9,496.00	\$4,675.00	\$4,821.00
2.1	Creditor's	Name		that secures the claim:	ψθ,490.00	Ψ4,073.00	φ4,021.00
	14101 N	MYFORD RD FL 2 er Street	2012 Nissan Sentra  As of the date you file.	the claim is: Check all that apply.			
			Contingent	,			
	TUSTIN	CA 92780	Unliquidated				
	City	State ZIP Code	Disputed				
		es the debt? Check one. tor 1 only	Nature of lien. Check a	Il that apply.			
	Deb <sup>1</sup>	tor 2 only		made (such as mortgage or secured			
	Deb	tor 1 and Debtor 2 only	car loan)	as tax lien, mechanic's lien)			
	-	ast one of the debtors another	Judgment lien from	•			
		ck if this claim relates	Other (including a ri				
	to a	community debt bt was <u>4/2015</u>	Last 4 digits of accoun	1000			
0.0	incurred				Φ0.007.00	Ф0.400.00	Φ0.00
2.2	Creditor's			that secures the claim:	\$2,807.00	\$3,400.00	\$0.00
	950 FOI Numbe	RRER BLVD er Street	Furniture As of the date you file.	the claim is: Check all that apply.			
			Contingent	,			
	KETTER	ING OH 45420	Unliquidated				
	City	State ZIP Code	Disputed				
		es the debt? Check one. tor 1 only	Nature of lien. Check a	ll that apply.			
		tor 2 only	An agreement you	made (such as mortgage or secured			
	Deb	tor 1 and Debtor 2 only	car loan)	so toy lien, machaniala lien)			
		ast one of the debtors		as tax lien, mechanic's lien)			
		another ck if this claim relates	Judgment lien from				
	to a	community debt bt was <u>3/2017</u>	Other (including a right Last 4 digits of account				
	incurred				L #10.000.00		
		Add the dollar value of you	our entries in Column A	on this page. Write that number	\$12,303.00		

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Fill i	n this inforr	nation to identify your c	ase:					
Deb	tor 1	Ruth		Chambers				
		First Name	Middle Name	Last Name				
	tor 2							
(Spo)	use, if filing)	First Name	Middle Name	Last Name				
Unit	ed States B	ankruptcy Court for the:	Northern	District of Illinois (State)				
Case (If knd	e number own)							
Off	icial Fo	orm 106E/F				Ch	eck if this is ar	n amended filing
Sc	hedu	le E/F: Cre	ditors Who	Have Un	secured Claim	S		12/15
Form clain the e know	106A/B) ans that are entries in the that are entries in the entrie	nd on Sc <i>hedule G: Exe</i> listed in <i>Schedule D: C</i> ne boxes on the left. At	cutory Contracts and Une reditors Who Hold Claims	expired Leases (Office Secured by Prope	aim. Also list executory contracted in the contr	le any credito opy the Part y	rs with partia ou need, fill i	ally secured t out, number
1.	-	editors have priority un ão to Part 2.	secured claims against y	ou?				
2.	listed, iden As much a Continuati	tify what type of claim it is possible, list the claims on Page of Part 1. If mor	is. If a claim has both priorit	y and nonpriority and ding to the creditor's particular claim, list t		ow both priorit	y and nonprio	rity amounts.
						Total claim	Priority amount	Nonpriority amount

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Debto	r 1 Ruth First Name Middle Name	Chambers Last Name	Case number (if known)	
Part 2				
3. C	o any creditors have nonpriority unsecured claim  No. You have nothing to report in this part. So  Yes.	ms against you?	e court with your other schedules.	
u If	nsecured claim, list the creditor separately for each c	laim. For each claim li	r of the creditor who holds each claim. If a creditor has more sted, identify what type of claim it is. Do not list claims already incoratt 3.If you have more than four priority unsecured claims fill out	cluded in Part 1.
4.1	CAP1/DBARN Nonpriority Creditor's Name		Last 4 digits of account number 4252	Total claim \$73.00
	PO Box 30285 Number Street		When was the debt incurred? 1/2011  As of the date you file, the claim is: Check all that apply.	
	City State Z Who incurred the debt? Check one.  Debtor 1 only	4130 ip Code	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim:	
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community Is the claim subject to offset?  No	debt	Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify CreditCard	
4.2	CHASE CARD Nonpriority Creditor's Name BANK ONE CARD SERV 2500 WESTFIELD DRI Number Street		Last 4 digits of account number 3177  When was the debt incurred? 7/2017  As of the date you file, the claim is: Check all that apply.	\$2,941.00
	City State Z  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only	D124 ip Code	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans	
	Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community is the claim subject to offset?  No  Yes	debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify CreditCard	
4.3	COMENITY BANK/CARSONS Nonpriority Creditor's Name 1314 PINELOG ROAD Number Street		Last 4 digits of account number 1446 When was the debt incurred? 6/2016  As of the date you file, the claim is: Check all that apply.  Contingent	\$82.00
			Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify CreditCard	

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Part 2	Your NONPRIORITY Unsecured Claims - Continuation	n Page	
	After listing any entries on this page, number them beginning w	rith 4.5, followed by 4.6, and so forth.	Total claim
4.4	COMENITY BANK/LNBRYANT	<ul> <li>Last 4 digits of account number 1320</li> </ul>	\$604.00
	Nonpriority Creditor's Name 4590 E Broad St	When was the debt incurred? 10/2010	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Columbus Ohio 43213	- Unliquidated	
	City State Zip Code  Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify CreditCard	
	<b>▼</b> No		
	Yes		
4.5	KOHLS/CAPONE	- Last 4 digits of account number 1673	\$1,165.00
	Nonpriority Creditor's Name PO BOX 3115	When was the debt incurred? 12/2015	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	MILWAUKEE         Wisconsin         53201           City         State         Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	Other. Specify CreditCard	
	✓ No		
	Yes		
4.6	MIDNIGHT VELVET Nonpriority Creditor's Name	Last 4 digits of account number	\$117.50
	1112 7TH AVE	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		- Contingent	
	MONROE Wisconsin 53566	Unliquidated	
	City State Zip Code	Disputed	
	Who incurred the debt? Check one.  Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	Other. Specify Credit Card	
	No		
	Yes		

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 Debtor 1 First Name
 Ruth
 Chambers
 Case number (if known)

 Last Name
 Last Name

Part :	Your NONPRIORITY Unsecured Claims - Continuation	n Page	
	After listing any entries on this page, number them beginning w	rith 4.5, followed by 4.6, and so forth.	Total claim
4.7	ONEMAIN Nonpriority Creditor's Name P.O. Box 742536 Number Street	Last 4 digits of account number 2590 When was the debt incurred? 5/2018	\$3,729.00
	Cincinnati Ohio 45274 City State Zip Code Who incurred the debt? Check one.  ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes	As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify 036 InstallmentLoan	
4.8	SYNCB/CARE CREDIT  Nonpriority Creditor's Name C/O P.O. BOX 965036  Number Street  ORLANDO Florida 32896 City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Is the claim subject to offset?  Yes	Last 4 digits of account number 4245 When was the debt incurred? 8/2016  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify CreditCard	\$584.00
4.9	SYNCB/JCP Nonpriority Creditor's Name PO BOX 965007 Number Street  Orlando Florida 32896 City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset?  Yes	Heat 4 digits of account number 4478  When was the debt incurred? 3/2017  As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify CreditCard	\$127.00

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Debtor 1 Ruth Chambers Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 SYNCB/SAMS CLUB \$464.00 Last 4 digits of account number 0234 Nonpriority Creditor's Name PO BOX 981400 When was the debt incurred? 9/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent **EL PASO** 79998 Texas Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify CreditCard Is the claim subject to offset? **✓** No Yes 4.11 SYNCB/WALMART \$1,294.00 8331 Last 4 digits of account number Nonpriority Creditor's Name Po Box 530927 When was the debt incurred? 1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent Atlanta Georgia 30353 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? CreditCard **✓** No Yes 4.12 TD BANK USA/TARGETCRED \$1,636.00 Last 4 digits of account number 2964 Nonpriority Creditor's Name When was the debt incurred? PO BOX 673 12/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent MINNEAPOLIS Minnesota 55440 Unliquidated State Zip Code City Disputed Who incurred the debt? Check one. Debtor 1 only ◪ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another

✓ No ✓ Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

debts

Other. Specify

Debts to pension or profit-sharing plans, and other similar

CreditCard

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Debtor 1 Ruth Chambers Case number (if known)
First Name Middle Name Last Name

Part 4: Add th	ne Amounts for Each Type of Unsecured Claim		
	mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.	for s	tatistical reporting purposes
			Total claims
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$0.00
	6b. Taxes and certain other debts you owe the government		\$0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$0.00
			Total claims
Total claims from Part 2	6f. Student loans	6f.	\$0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$12,816.50
	6i. Total. Add lines 6f through 6i.	6i.	\$12,816.50

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Fill in this information to identify your case:							
Debtor 1	Ruth		Chambers				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States E	Bankruptcy Court for the:	Northern	District of Illinois				
		_	(State)				
Case number							
(If known)							

#### Official Form 106G

#### Check if this is an amended filing

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or compa	any with whom you have	the contract or lease	State what the contract or lease is for
2.1	Oak Forest Horizon Name 14904 Cicero Ave			Residential Lease, Debtor is Lessee, Yearly Residential Lease
	Number Oak Forest	Street Illinois	60452	
	City	State	Zip Code	

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			Do	cument Page 3	31 of 69	9
Fill in	this infor	mation to identify your ca	ase:			
Debto	r 1	Ruth		Chambers		
		First Name	Middle Name	Last Name		
Debto (Spous	r 2 e, if filing)	First Name	Middle Name	Last Name		
United	d States B	ankruptcy Court for the:	Northern	District of Illinois		
Case	number			(State)		
(If know						_
						Check if this is an amended filing
Offi	icial	Form 106H				•
			alatava			
		e H: Your Cod				12/15
filing t the en	ogether, tries in t	both are equally respor	nsible for supplying corre	ct information. If more spa	ce is nee	nd accurate as possible. If two married people are ded, copy the Additional Page, fill it out, and number itional Pages, write your name and case number (if
1.	Do you l	have any andobtors? (If	vou ara filing a joint agaa d	a not list either angues as a	andahtar)	
١.	□ No	= -	you are ming a joint case, o	o not list either spouse as a	codebior.)	
	Ye	S				
2.						ity property states and territories include Arizona,
		a, Idano, Louisiana, Nevado. O. Go to line 3.	da, New Mexico, Puerto Ric	o, Texas, Washington, and \	Wisconsin	.)
			ner spouse, or legal equiv	alent live with you at the tir	me?	
		No				
		Yes. In which commun	nity state or territory did y	ou live?	Fill in tl	ne name and current address of that person.
		Name of your spouse, for	ormer spouse, or legal equi	valent		
		Number Street				
		City	State	Zip Code		
3.	again as	s a codebtor only if that	person is a guarantor or	cosigner. Make sure you h	nave liste	use is filing with you. List the person shown in line 2 d the creditor on <i>Schedule D</i> (Official Form 106D), chedule E/F, or <i>Schedule G</i> to fill out Column 2.
	Column	1: Your codebtor			Colu	mn 2: The creditor to whom you owe the debt
					Chec	ck all schedules that apply:
3.1	Robinso	n Sr, John H			_	Schedule D, line 2.1
	Name				<b>一 回</b>	,
		523 N Pleasant Dr			- 17	Schedule E/F, line

60425 Zip Code Schedule G, line \_

Number

City

Glenwood

Street

Illinois

State

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		_			5			
Fill in this	s information to identify	your case:						
Debtor 1	Ruth		Cham	hers				
2001011	First Name	Middle Name	Last N			Che	ock if this is:	
Debtor 2	filing) Fig. 1.11						An amended filing	
(Spouse, if 1	First Name	Middle Name	Last N	ame			•	n abantas 1
_	ates Bankruptcy Court for	Northern	District of Ill				A supplement showing post-petition expenses as of the following date:	n cnapter 1
the: Case num	nber		(8	State)				
(If known)	<u>-</u>				-		MM / DD / YYYY	
Officia	al Form 106I							
Sched	dule I: Your In	come						12/1
spouse. If number (i		l, attach a separate she y question.					not include information about ional pages, write your name a	
	your employment		Debtor 1				Debtor 2	
inforn	nation.	Employment status	Emplo	wad			Employed	
_	have more than one job, a separate page with	. ,	✓ Not Er	-	ed		Not Employed	
inform	nation about additional		<b>V</b>					
emplo		Occupation						
	de part time, seasonal, or mployed work.	Employer's name						
	oation may include student	Employer's address						
	memaker, if it applies.		Number St	reet			Number Street	
			City		State	Zip Code	City State Zip	o Code
		How long employed there?						
Part 2:	Give Details About N	Monthly Income						
	e monthly income as of tunless you are separated.	the date you file this form	<b>n.</b> If you have	nothi	ng to report t	for any line, v	vrite \$0 in the space. Include your r	non-filing
	your non-filing spouse have ace, attach a separate she		combine the	inforr	nation for all	employers fo	r that person on the lines below. If	you need
					For Deb	otor 1	For Debtor 2 or non-filing spouse	
	monthly gross wages, sala uctions.) If not paid monthly			2.		\$0.00	-	
3. Esti	mate and list monthly over	rtime pay.		3.		+ \$0.00		
4. Cald	<b>culate gross income.</b> Add li	ine 2 + line 3.		4.		\$0.00		

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Dec	tor 1 <u>Ruth</u> First Name		Chambers Last Name	Case number	er <i>(if</i>		
	First Name	Middle Name	Last Name	known) For Debtor 1	For Debtor 2 or non-filing spouse		
С	opy line 4 here		<b>→</b> 4.	\$0.00			
5. <b>Li</b>	st all payroll deduction						
		Social Security deductions	5a.	\$0.00			
5	b. Mandatory contribut	tions for retirement plans	5b.	\$0.00			
5	c. Voluntary contribution	ons for retirement plans	5c.	\$0.00			
5	d. Required repayment	ts of retirement fund loans	5d.	\$0.00			
5	e. Insurance		5e.	\$0.00			
5	f. Domestic support ob	ligations	5f.	\$0.00			
5	g. <b>Union dues</b>		5g.	\$0.00			
5	h. Other deductions. S	pecify:	5h.	+ \$0.00			
6. <b>A</b> +5h.		ons. Add lines 5a + 5b + 5c + 5d + 5e +5	f + 5g 6.	\$0.00			
7. <b>C</b>	alculate total monthly	take-home pay. Subtract line 6 from line	94. 7.	\$0.00			
8. <b>Li</b>	st all other income reg	gularly received:					
8	business, profession	•					
		each property and business showing y and necessary business expenses, and					
	the total monthly net i	ncome.	8a.	\$0.00			
8	b. Interest and dividen	ds	8b.	\$0.00			
8	dependent regularly						
	Include alimony, spou divorce settlement, an	ısal support, child support, maintenance, d property settlement.	8c.	\$0.00			
8	d. Unemployment com	pensation	8d.	\$0.00			
8	e. Social Security		8e.	\$1,637.00			
8	Include cash assistanc cash assistance that yo	ssistance that you regularly receive se and the value (if known) of any non- bu receive, such as food stamps (benefits al Nutrition Assistance Program) or	8f.	\$0.00			
8	g. Pension or retireme	nt income	8g.	\$0.00			
8	h. Other monthly incom	ne. Specify: John H. Robinson Sr.	8h.	+ \$369.00	+		
9. <b>A</b>	dd all other income Add	d lines 8a + 8b + 8c + 8d + 8e + 8f +8g -	+ 8h. 9.	\$2,006.00		.]	
	calculate monthly incorded the entries in line 10 f	<b>me.</b> Add line 7 + line 9. for Debtor 1 and Debtor 2 or non-filing sp	10. couse	\$2,006.00	+	.]=	\$2,006.00
lr fr	nclude contributions from iends or relatives.	contributions to the expenses that you n an unmarried partner, members of your nts already included in lines 2-10 or amou	household, yo	ur dependents, your room	,		
s	pecify:					11. +	\$0.00
		last column of line 10 to the amount i Summary of Schedules and Statistical Su				12.	\$2,006.00
							Combined monthly income
13. [	No.	ase or decrease within the year after	you file this fo	rm?			
	Yes. Explain:						

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		D00	cament 1 age 54 of 6	3		
Fill in this infor	mation to identify your ca	ase:				
Debtor 1	Ruth		Chambers			
	First Name	Middle Name	Last Name	Check if this is:		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	An amended filing	9	
United States E	Bankruptcy Court for the:	Northern	District of Illinois	A supplement sho		petition chapter 13 date:
Case number (If known)			(State)	MM / DD / YYYY		
Official	Form 106J					
Schedul	e J: Your Exp	enses				12/15
(if known). Ans	more space is needed, a wer every question. cribe Your Household		nis form. On the top of any addition	al pages, write your na	me and case	e number
1. Is this a joi	nt case?					
✓ No. Go	to line 2					
Yes. D	oes Debtor 2 live in a se	parate household?				
_ [	No  Yes Debtor 2 must file	Official Forms 106.I-2 Exp	penses for Separate Household of Del	ntor 2		
2 Do you hay	e dependents?		ronoce for copulate modestroid of box	7.07 2.		
Do not list Debtor 2.	Debtor 1 and Yes	s. Fill out this information for the contraction for the contracti	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does depe with you?	endent live
	penses include					
than	Vo					
yourself an dependents	-	•				
Part 2: Esti	mate Your Ongoing N	onthly Expenses				
-	of a date after the bankr		s you are using this form as a supp upplemental Schedule J, check th	=	-	
			e if you know the value of ne (Official Form B 106I.)			Your expenses
	I or home ownership exporthe ground or lot. 4.	enses for your residence.	Include first mortgage payments and	I	4.	\$795.00
If not incl	uded in line 4:					
4a. Real e					4a	\$0.00
4b. Prope	rty, homeowner's, or rente	er's insurance			4b.	\$0.00

4c.

4d.

\$0.00

\$0.00

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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 Debtor 1 First Name
 Ruth
 Chambers
 Case number (if known)

 Last Name
 Last Name

5. Additional mortgage payments for your residence, such as home equity loans         5.         \$0.00           6. Utilities:         6.         \$0.00           6. Utilities:         6.         \$115.00           6. Utilities:         6.         \$115.00           6. Utility was page collection         6.         \$0.00           6. Crelephone, coll phone, Internet, statilite, and cable services         6.         \$100.00           6. Crelephone, coll phone, Internet, statilite, and cable services         6.         \$100.00           6. Crelephone, coll phone, Internet, statilite, and cable services         6.         \$100.00           6. Crelephone, coll phone, Internet, statilite, and cable services         6.         \$100.00           6. Crelephone, coll phone, Internet, statility, and cry cleaning         7.         \$300.00           7. Coldring, Bundry, and dry cleaning         9.         \$400.00           10. Personal care products and services         11.         \$400.00           11. Medicial and dental sysnese         11.         \$400.00           12. Transportation, Include gas, maintenance, bus or train favo.         12.         \$800.00           13. Entertainment, clubse, recreation, newspapers, magazines, and books         13.         \$200.00           14. Charitable contributions and religious donations         14.	First Name	Middle Name Last Name		
Section   Sect				Your expenses
6a. Electricity, heat, natural gas	5. Additional mortgage paym	ents for your residence, such as home equity loans	5.	\$0.00
6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$100.00           6d. Other, Specify:         7.         \$300.00           7. Food and housekceping supplies         7.         \$300.00           8. Childcare and children's education costs         8.         \$0.00           9. Citothing, laundry, and dry cleaning         9.         \$40.00           10. Personal care products and services         11.         \$40.00           11. Medical and dental expenses         11.         \$40.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$80.00           10. Do not include care payments         13.         \$0.00           14. Charitable contributions and religious donations         13.         \$0.00           15. Insurance         15         \$20.00           15a. Life insurance         15         \$20.00           15c. Vehicle insurance         15         \$0.00           15c. Vehicle insurance         15         \$0.00           15c. Vehicle insurance         15         \$0.00           15c. Taxes Do not include taxes deducted from your pay or included in lines 4 or 20.         \$0.00           \$psecify:         1	6. Utilities:			
6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$100.00           6d. Other, Specify:         6d.         \$0.00           7. Food and housekeeping supplies         7.         \$300.00           8. Childcare and children's education costs         8.         \$9.00           9. Clothing, laundry, and dry cleaning         9.         \$40.00           10. Personal care products and services         10.         \$40.00           11. Medical and dental expenses         11.         \$40.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$80.00           15. Instracte.         13.         \$9.00           16. Charitable contributions and religious donations         14.         \$0.00           15. Instracte.         15.         \$28.00           15. Leal insurance         156.         \$9.00           15. Leal insu	6a. Electricity, heat, natural g	gas	6a.	\$115.00
6d. Other. Specify  6d. Other Specify  7. Food and housekeeping supplies 7. Solution 7. Soluti	6b. Water, sewer, garbage of	ollection	6b.	\$0.00
7. Food and housekeeping supplies         7.         \$300.00           8. Childcare and childcare's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$40.00           10. Personal care products and services         10.         \$40.00           11. Medical and dental expenses         11.         \$40.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$80.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Insurance.         15s         \$28.05           15. Insurance.         15s         \$0.00           15c. Vehicle insurance educated from your pay or included in lines 4 or 20.         \$50.00         \$0.00           15c. Vehicle insurance. Specify:         15c         \$0.00	6c. Telephone, cell phone, I	nternet, satellite, and cable services	6c.	\$100.00
8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$40.00           10. Personal care products and services         10.         \$40.00           11. Medical and dental expenses         11.         \$40.00           12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments         12.         \$80.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.         15a.         \$28.05           15b. Health insurance         15a         \$28.05           15b. Lealth insurance         15c         \$93.00           15d. Other insurance. Specify:         15c         \$9.00           15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.         \$9.00           17c. Installment or lease payments:         17a         \$0.00           17a. Car payments for Vehicle 1         17a         \$369.00           17c. Other. Specify:         17c         \$0.00           17c. Other. Specify:         17d         \$0.00           17c. Other. Specify:         17d         \$0.00           17c. Other. Specify:         17d         \$0.00	6d. Other. Specify:		6d	\$0.00
9. Clothing, laundry, and dry cleaning         9. \$40.00           10. Personal care products and services         10. \$40.00           11. Medical and dental expenses         11. \$40.00           12. Transportation. Include gas, maintenance, bus or train fare.         12. \$80.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13. \$0.00           14. Charitable contributions and religious donations         14. \$0.00           15. Insurance.         15. Insurance           Do not include insurance deducted from your pay or included in lines 4 or 20.         155. \$28.05           15. Lie insurance         155. \$20.00           15. C. Vehicle insurance         156. \$20.00           15. C. Vehicle insurance. Specify:         150. \$0.00           15. Vehicle insurance. Specify:         150. \$0.00           15. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.         \$0.00           15. Vehicle insurance.         156. \$0.00           16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.         \$0.00           17. Installment or lease payments:         170.         \$0.00           17. Car payments for Vehicle 1         17a. \$3.00         \$0.00           17. Cother. Specify:         17b. \$0.00         \$0.00           17. Cother. Specify:	7. Food and housekeeping su	pplies	7.	\$300.00
10. Personal care products and services       10.       \$40.00         11. Medical and dental expenses       11.       \$40.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       12.       \$80.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       14.       \$0.00         15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15a       \$28.05         15b. Health insurance       15c. Vehicle insurance       15c. Sp3.00       \$0.00         15c. Vehicle insurance       15c. Vehicle insurance.       15c. Sp3.00         15c. Vehicle insurance. Specify:       15c. Sp3.00       \$0.00         15c. Vehicle insurance. Specify:       15c. Sp3.00       \$0.00         15c. Vehicle insurance. Specify:       15c. Sp3.00       \$0.00         15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         17c. Installment or lease payments.       17c. Sp3.00       \$0.00         17b. Car payments for Vehicle 1       17c. Sp3.00       \$0.00         17c. Chiher. Specify:	8. Childcare and children's e	ducation costs	8.	\$0.00
11. Medical and dental expenses       11.       \$40.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       12.       \$80.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       13.       \$80.00         14. Charitable contributions and religious donations       14.       \$0.00         15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15a       \$28.05         15b. Health insurance       15b. So.00       15c. Vehicle insurance       15c. So.00       \$0.00         15c. Vehicle insurance. Specify:       15d. \$0.00       \$0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$9.00       \$0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$9.00       \$0.00         17. Installment or lease payments:       17a       \$3.00         17a. Car payments for Vehicle 2       17a       \$0.00         17b. Car payments for Vehicle 2       17b       \$0.00         17c. Other. Specify:       17c       \$0.00         18. Your payments of a limony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106i).       18.         19. Oth	9. Clothing, laundry, and dry	cleaning	9.	\$40.00
12.   Transportation. Include gas, maintenance, bus or train fare. Do not include car payments   12.   \$80.00 not include car payments   13.   \$0.00 not include car payments   13.   \$0.00 not include car payments   14.   \$0.00 not include car payments   14.   \$0.00 not include contributions and religious donations   14.   \$0.00 not include insurance deducted from your pay or included in lines 4 or 20.   15a.   Life insurance   15b.   \$28.05	10. Personal care products a	nd services	10.	\$40.00
Do not included car payments   13.	11. Medical and dental exper	nses	11.	\$40.00
14. Charitable contributions and religious donations       14. \$0.00         15. Insurance.       30.00         Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15a. S28.05         15b. Health insurance       15b. \$0.00       15c. Vehicle insurance       15c. \$93.00         15c. Vehicle insurance. Specify:       15d. \$0.00       \$0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$9.00       \$0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00       \$0.00         17. Installment or lease payments:       16       \$0.00         17. Installment or lease payments:       17a       \$369.00         17b. Car payments for Vehicle 1       17a       \$369.00         17c. Other. Specify:       17c       \$0.00         17c. Other. Specify:       17c       \$0.00         17c. Other. Specify:       17c       \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Other payments you make to support others who do not live with you.       \$0.00         Specify:       19.       \$0.00         20a. Mortgages on other property	-		12.	\$80.00
15. Insurance.	13. Entertainment, clubs, rec	reation, newspapers, magazines, and books	13.	\$0.00
Do not include insurance deducted from your pay or included in lines 4 or 20.   15a. Life insurance   15a   \$28.05     15b. Health insurance   15c   \$30.00     15c. Vehicle insurance   15c   \$393.00     15c. Vehicle insurance. Specify   15d   \$0.00     15d. Other insurance. Specify   15d   \$0.00     15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   Specify   16   \$0.00     17c. Installment or lease payments:   17a   \$369.00     17b. Car payments for Vehicle 1   17a   \$369.00     17c. Other. Specify   17c   \$0.00     17c. Other. Specify   17d   \$0.00     17d. Other. Specify   17d   \$0.00     18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).   18.     19. Other payments you make to support others who do not live with you.   Specify   19. \$0.00     20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.   20a   \$0.00     20b. Real estate taxes.   20b   \$0.00     20c. Property, homeowner's, or renter's insurance   20c   \$0.00     20d. Maintenance, repair, and upkeep expenses.   20d   \$0.0	14. Charitable contributions	and religious donations	14.	\$0.00
15b Health insurance   15b   \$0.000   15c. Vehicle insurance   15c   \$93.00   15d. Other insurance. Specify:		ducted from your pay or included in lines 4 or 20.		
15c. Vehicle insurance	15a. Life insurance		15a	\$28.05
15d. Other insurance. Specify:	15b. Health insurance		15b	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   Specify:	15c. Vehicle insurance		15c	\$93.00
Specify:	15d. Other insurance. Speci	fy:	15d	\$0.00
17.   Installment or lease payments:   17a. Car payments for Vehicle 1   17a   \$369.00   17b. Car payments for Vehicle 2   17b   \$0.00   17c. Other. Specify:   17c   \$0.00   17d. Other. Specify:   17d   \$0.00   17d. Other. Specify:   17d   \$0.00   18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).   18.   19. Other payments you make to support others who do not live with you.   19. \$0.00   20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.   20a   \$0.00   20b. Real estate taxes.   20b   \$0.00   20b. Real estate taxes.   20c. Property, homeowner's, or renter's insurance   20d. \$0.00   20d. Maintenance, repair, and upkeep expenses.   20d. \$0.00   \$0.00   \$0.00   20d. Maintenance, repair, and upkeep expenses.   20d. \$0.00   \$0.00   20d. Maintenance, repair, and upkeep expenses.   20d. \$0.00   \$0.00	16. Taxes. Do not include taxes	s deducted from your pay or included in lines 4 or 20.		
17. Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17b. Car payments for Vehicle 2  17c. Other. Specify:  17c. Other. Specify:  17d. So.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  18. 19. Other payments you make to support others who do not live with you.  Specify:  19. \$0.00  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a \$0.00  20b. Real estate taxes.  20b \$0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  20d. \$0.00	Specify:		16	\$0.00
17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. So.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00	17. Installment or lease paym	nents:	10	
17c. Other. Specify: 17d. S0.00 17d. Other. Specify: 17d \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18.  19. Other payments you make to support others who do not live with you.  Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00	17a. Car payments for Vehic	cle 1	17a	\$369.00
17d. Other. Specify:	17b. Car payments for Vehic	cle 2	17b	\$0.00
17d. Other. Specify:	17c. Other. Specify:		17c	\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a. \$0.00  20b. Real estate taxes.  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.			17d	\$0.00
19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a \$0.00  20b. Real estate taxes.  20b \$0.00  20c. Property, homeowner's, or renter's insurance  20c \$0.00  20d. Maintenance, repair, and upkeep expenses.  20d \$0.00		••		\$0.00
Specify:			18.	
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses. 20d \$0.00		e to support others who do not live with you.	10	<b>#0.00</b>
20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses. 20d \$0.00		ses not included in lines 4 or 5 of this form or on Schedule I: Your Income	19.	\$0.00
20b. Real estate taxes.  20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses.  20d. \$0.00			202	\$0.00
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00				
20d. Maintenance, repair, and upkeep expenses.  20d \$0.00		s, or renter's insurance		
	20e. Homeowner's associati	ion or condominium dues		

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Debtor 1	Ruth		Chambers	Case number (if known)		
F	First Name	Middle Name	Last Name			
21. <b>Other.</b>	Specify:				21	\$0.00
22. Calcu	late your monthly expe	enses.				\$2,000.05
22a. Ad	dd lines 4 through 21.					\$0.00
22b. C	opy line 22 (monthly exp	penses for Debtor 2), if any,	from Official Form 106J-2			\$2,000.05
22c. Ad	dd line 22a and 22b. Th	e result is your monthly exp	enses.		22.	
23. Calcul	ate your monthly net i	ncome.				
23a. C	opy line 12 (your combir	ned monthly income) from	Schedule I.		23a	\$2,006.00
23b. C	opy your monthly expen	nses from line 22 above.			23b	\$2,000.05
	, , ,	penses from your monthly i	ncome.			\$5.95
Т	he result is your monthly	y net income.			23c	
24. <b>Do yo</b>	u expect an increase o	or decrease in your expen	ses within the year after yo	ou file this form?		
-	•		-			
			oan within the year or do you nodification to the terms of y			
.✓ No	0					
L YE	es					
	Explain here:					
23b. C 23c. St T 24. <b>Do yo</b> t	opy your monthly experubtract your monthly expered to result is your monthly unexpect an increase of the control of the contro	nses from line 22 above.  Denses from your monthly it y net income.  Dense in your expendent of this paying for your carly	ncome. ses within the year after yo oan within the year or do you	expect your	23b	\$2,000

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Fill in this inform	mation to identify your c	ase:		
Debtor 1	Ruth		Chambers	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States B	Sankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case number (If known)				
	Form 106De	<del></del>		amended fi
Declarati	ion About an	individuai Deb	tor's Schedules	<u>S</u>
f two married	people are filing togeth	er, both are equally resp	onsible for supplying correct	ct information.
money or prope				laking a false statement, concealing property, or obtaining \$250,000, or imprisonment for up to 20 years, or both. 18

Part 1: Sign Below

	Did you pay or agree to pay someone who is NOT an attorney to	help you fill out bankruptcy forms?	
	✓ No		
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).	
	Under penalty of perjury, I declare that I have read the summary that they are true and correct.	y and schedules filed with this declaration and	
×	/s/ Ruth Chambers	×	
	Signature of Debtor 1	Signature of Debtor 2	
	Date 8/6/2018	Date	

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Fill in th	nis infor	mation to identify	your cas	se:										
Debtor	1	Ruth First Name		Middle	Name		mbers Name		-					
Debtor (Spouse, i		First Name		Middle	Name	Last	Name		-					
United 9	States B	ankruptcy Court f	or the:			_ District of								
Case nu							(State)		-					
Offic	cial	Form 10	7										Check if amende	
		nt of Fina	_	Affairs 1	or Ind	lividua	ls Fi	ling fo	r Ban	kru	ptcy			04/1
Be as c	omple ation. I	e and accurate	as poss	sible. If two m	arried pe	ople are fil	ing tog	ether, bot	h are eq	ally r	esponsible		oplying correct ur name and ca	se
Part 1:	Give	Details About	Your M	larital Status	and Whe	ere You Li	ved Be	fore						
1. W	Vhat is	your current man	ital stat	us?										
	_	ried married												
2. D	uring t	he last 3 years, h	ave you	lived anywher	e other th	an where yo	ou live r	iow?						
	☐ No ✓ Yes	. List all of the pla	ices you	lived in the las	t 3 years.	Do not inclu	ude whe	re you live	now.					
	Deb	tor 1:			Dates I there	Debtor 1 live	ed	Debtor 2:					Dates Debtor 2 li there	ived
								Same a	s Debtor				Same as Deb	tor 1
		N Pleasant Drive			From _			Number Str	eet				From	_
	Gler City	nwood Illind Stat		60425 Zip Code	-			City	Sta	e	Zip Code			=
								Same a	s Debtor				Same as Deb	tor 1
	Nun	nber Street			From _ To _			Number Str	eet				From	- -
	City	Stat	е	Zip Code				City	Sta	е	Zip Code	<u> </u>		
	d territor	last 8 years, dicies include Arizona	a, Califorr	nia, Idaho, Loui	siana, Neva	ada, New Me	exico, Pu	erto Rico, T					munity property st	ates

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Debto	or 1		Chamb		number (if known)	
		First Name Middle	Name Last Nan	ne		
Part :	2:	<b>Explain the Sources of Your Inc</b>	come			
F a	Fill i	you have any income from employment the total amount of income you receivities. If you are filing a joint case and you No Yes. Fill in the details.	red from all jobs and all busing	nesses, including part-time		ears?
•			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		om January 1 of current year until e date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business		Wages, commissions, bonuses, tips Operating a business	
		or last calendar year: anuary 1 to December 31, 2017 ) YYYY	Wages, commissions, bonuses, tips Operating a business		Wages, commissions, bonuses, tips Operating a business	
		or the calendar year before that: anuary 1 to December 31, 2016 ) YYYYY	Wages, commissions, bonuses, tips Operating a business		Wages, commissions, bonuses, tips Operating a business	
Ir p fi	ubl ling ist	you receive any other income during de income regardless of whether that in ic benefit payments; pensions; rental inc a joint case and you have income that each source and the gross income from No  Yes. Fill in the details.	come is taxable. Examples come; interest; dividends; moyou received together, list it	of other income are alimony; oney collected from lawsuits only once under Debtor 1.	; royalties; and gambling and	
_			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
		rom January 1 of current year until ne date you filed for bankruptcy:	EST YTD income SSI	\$11,459.00		
		or last calendar year: lanuary 1 to December 31, 2017 ) YYYY	EST income SSI	\$19,512.00		
		or the calendar year before that: lanuary 1 to December 31, 2016 ) YYYY	EST income SSI	\$19,512.00		

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Debtor 1 Ruth Chambers Case number (if known) First Name Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Was this payment Dates of payment Total amount paid Amount you still owe for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City Suppliers or State Zip Code vendors

Other

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1 <u>R</u>					ımbers	Case number	(if known)
Fi	irst Name		Middle Name	Last	Name		
nsider orpor gent,	rs include your rations of whicl	relatives; and you are and for a busin	ny general partners n officer, director, p ess you operate as	; relatives of any goerson in control, or	eneral partners; part or owner of 20% or	nerships of which y more of their voting	who was an insider? You are a general partner; If securities; and any managing If domestic support obligations,
N Y	lo ´es. List all pay	ments to a	ın insider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
In	sider's Name			·			
Νι	umber Street						
Ci	ty	State	Zip Code				
In	sider's Name						
Νι	umber Street						
Cir	ty	State	Zip Code				
nside nclude	r? e payments on O	debts gua	for bankruptcy, d ranteed or cosigned benefited an insi	d by an insider.	payments or trans	Amount you	n account of a debt that benefited an  Reason for this payment
				payment	paid	still owe	Include creditor's name
In	sider's Name						
Nu	umber Street						
Cir	ty	State	Zip Code				
In	sider's Name						
Nu	umber Street						
Cit	tv	State	Zip Code				

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Debtor 1 Ruth Chambers Case number (if known) Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded Citv State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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Debtor	r 1 Ruth	Chambers	Case number (if known)	
	First Name Middle Name	Last Name		
	Within 90 days before you filed for bankruptcy accounts or refuse to make a payment becau		or financial institution, set off any amo	ounts from your
]	No Yes. Fill in the details.			
١		Describe the action the cre	Date action was taken	Amount
	Creditor's Name			
	Number Street			
		Last 4 digits of account numb	per: XXXX-	
	City State Zip Code	<del></del>		
	Within 1 year before you filed for bankruptcy, on the proposition of t		ession of an assignee for the benefit of	creditors, a court-
[	✓ No			
Part 5	Yes List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankruptcy	y, did you give any gifts with a total v	value of more than \$600 per person?	
	No Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift			
	Number Street			
	City State Zip Code			
	Person's relationship to you			
	Person to Whom You Gave the Gift	_		
	Number Street			
	City State Zip Code Person's relationship to you			

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btor 1	Ruth		Chambers	Case number (if know	vn)	
	First Name	Middle Name	Last Name	<u> </u>		
Wit	hin 2 years before you fi	led for bankruptcy, did	l you give any gifts or contribut	ions with a total value	of more than \$600	to any charity?
<b>✓</b>	No					
		r anab gift or contribut	ion			
Ш	Yes. Fill in the details fo	r each gill or contribut	OH.			
	Gifts or contributions t		Describe what you contrib	outed	Date you	Value
	that total more than \$6	600			contributed	
	Charity's Name		-			
	Orianty 3 Name					
	-		-			
	Number Street		-			
	Number Street					
	City State	Zip Code	-			
	Oity	Zip Code				
t 6:	List Certain Losses					
	Yes. Fill in the details.  Describe the property how the loss occurred	you lost and	Describe any insurance c	urance has paid. List	Date of your loss	Value of property lost
			pending insurance claims o A/B: Property.	n line 33 of <i>Schedule</i>		
			A.B. Floperty.			
t <b>7:</b>	List Certain Paymen					
	No Yes. Fill in the details.					
			Description and value of a transferred	ny property	Date payment or transfer was made	Amount of payment
	Semrad Law Firm		Attornovia Egg. 0.00		8/6/2018	\$0.00
	Person Who Was Paid		Attorney's Fee - 0.00		0/0/2010	ψυ.υυ
	11101 S. Western Avenu	ıe				
	Number Street		-			
			-			
	Chicago Illino	is 60643				
	City State		•			
			_			
	Email or website address	<u> </u>				
	None None		-			
	Person Who Made the P	ayment, if Not You				
	Person Who Was Paid		-		]	
			_			
	Number Street		-			
	Number Street		-			
	Number Street		-			
		Zip Code	- - -			
	Number Street  City State	Zip Code	- - -			
			- - -			
	City State	3	- - - -			

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Debtor '	1 Ruth		Chambers	Case numb	er <i>(if known)</i>	
	First Name	Middle Name	Last Name		<u></u>	
he	thin 1 year before you filed for lp you deal with your creditors not include any payment or trans	or to make paym	ents to your creditors?	our behalf pay oi	transfer any property to	anyone who promised to
F	Yes. Fill in the details.					
	res. Fill III the details.					
			Description and value of a transferred	ny property	Date payment or transfer was made	Amount of payment
	Person Who Was Paid					
	Number Street					
	City State	Zip Code				
	Oity State	Zip Oode				
	No Yes. Fill in the details.		Description and value of patransferred	pay	scribe any property or ments received or debts oxchange	Date paid transfer was made
	Person Who Received Transfer				Adminge	
	<del></del>					
	Number Street					
	City State Person's relationship to you	Zip Code				
	Person Who Received Transfer					
	Number Street					
	City State Person's relationship to you	Zip Code				
be	ithin 10 years before you filed for the state of the stat		d you transfer any property to	a self-settled tru	st or similar device of wh	ich you are a
<b>✓</b>						
L	Yes. Fill in the details.		Description and value of	the property tra	nsferred	Date transfer was
						made
	Name of trust					

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Debtor 1 Ruth Chambers Case number (if known) First Name Middle Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number instrument account was before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City Zip Code State XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code State Zip Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Yes Number Street Number Street

City

State

State

7in Code

Citv

Zip Code

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Debtor 1 Ruth Chambers Case number (if known)
First Name Middle Name Last Name

Part 9: Identify Property You Hold or Control for Someone Else

23. Po you hold or control any property that someone else owns? Include any property you horrowed from are storing for or hold in trust for

23. Do you hold or control someone.	any property that some	one else owns? Includ	de any property you b	orrowed from, are storing for, or hold in	trust for
<b>✓</b> No					
Yes. Fill in the deta	ils.				
		Where is the prop	erty?	Describe the contents	Value
Owner's Name		NumberStreet			
Number Street					
		City Sta	ate Zip Code		
City St	ate Zip Code				
Part 10: Give Details Abo	out Environmental In	formation			
For the purpose of Part 10, th	e following definitions app	oly:			
hazardous or toxic sub	ans any federal, state, or lostances, wastes, or mater egulations controlling the o	ial into the air, land, soi	il, surface water, ground		
	n, facility, or property as d te, or utilize it, including d		onmental law, whether y	ou now own, operate, or utilize it	
■ Hazardous material me				dous substance,	
toxic substance, hazar	dous material, pollutant, c	ontaminant, or similar t	erm.		
Report all notices, releases, an	d proceedings that you ki	now about, regardless of	of when they occurred.		
✓ No  ✓ Yes. Fill in the deta					?
	ils.	Governmental uni	t	Environmental law, if you know it	Date of notice
Name of site	ils.	Governmental unit	t	Environmental law, if you know it	Date of
Name of site	ils.	Governmental unit	t	Environmental law, if you know it	Date of
	ils.		t	Environmental law, if you know it	Date of
Name of site	ils.	Governmental unit		Environmental law, if you know it	Date of
Name of site  Number Street	ate Zip Code	Governmental unit  Number Street		Environmental law, if you know it	Date of
Name of site  Number Street  City St	ate Zip Code	Governmental unit  Number Street  City Sta	te Zip Code	Environmental law, if you know it	Date of
Name of site  Number Street  City St.  St. Have you notified any g		Governmental unit  Number Street  City Sta	te Zip Code	Environmental law, if you know it	Date of
Name of site  Number Street  City St.  St. Have you notified any g	ate Zip Code Jovernmental unit of any	Governmental unit  Number Street  City Sta	te Zip Code	Environmental law, if you know it	Date of
Name of site  Number Street  City St.  St. Have you notified any g	ate Zip Code Jovernmental unit of any	Governmental unit  NumberStreet  City Sta	ite Zip Code		Date of notice
Name of site  Number Street  City St.  St.  No	ate Zip Code Jovernmental unit of any	Governmental unit  Number Street  City Sta	ite Zip Code	Environmental law, if you know it	Date of
Name of site  Number Street  City St.  25. Have you notified any g  No  Yes. Fill in the deta	ate Zip Code Jovernmental unit of any	Governmental unit  Number Street  City Sta  release of hazardous  Governmental unit	ite Zip Code		Date of notice
Name of site  Number Street  City St.  25. Have you notified any g  No Yes. Fill in the deta	ate Zip Code Jovernmental unit of any	Governmental unit  NumberStreet  City Sta  release of hazardous  Governmental unit	ite Zip Code		Date of notice
Name of site  Number Street  City St.  25. Have you notified any g	ate Zip Code Jovernmental unit of any	Governmental unit  Number Street  City Sta  release of hazardous  Governmental unit	ite Zip Code		Date of notice
Name of site  Number Street  City St.  25. Have you notified any g  No Yes. Fill in the deta	ate Zip Code Jovernmental unit of any	Governmental unit  NumberStreet  City Sta  release of hazardous  Governmental unit	ite Zip Code		Date of notice

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Deb	tor 1					nambers	Ca	se number (i	f known)	
		First Name		Middle Name	Las	st Name				
26.	Hav	e you been a part	y in any judici	al or administi	ative proce	eding under	any environme	ntal law? In	nclude settlements and	orders.
		No Yes. Fill in the det	ails.							
					Court or ag	ency		Nature	of the case	Status of the case
		Case title			Cavet Name					Pending
		Case number			NumberStree					On appeal
		Case Humber			City	State	Zip Code			Concluded
Part	11:	Give Details Ab	oout Your B	usiness or Co	onnections	to Any Bu	siness			
27.	Witl	nin 4 years before	you filed for b	oankruptcy, die	d you own a	business or	have any of the	following o	connections to any busi	ness?
		A member of A partner in a An officer, di	a limited liabi a partnership rector, or mar	-	LC) or limite	ed liability pa	r activity, either artnership (LLP) poration		part-time	
	<b>V</b>	No. None of the a	bove applies	. Go to Part 12						
		Yes. Check all that	at apply abov	e and fill in the	details belo	w for each b	ousiness.			
					Descr	ribe the natu	re of the busin	ess	Employer Identification include Social Securi	
		Business Name			_				EIN:	
		Number Street			— Name	of account	ant or bookkee	per	Dates business existe	ed
		City	State	Zip Code	_				From To _	
					Descr	ribe the natu	ure of the busin	ess	Employer Identification	
		Business Name			_				EIN:	
		Number Street			Name	of account	ant or bookkee	ner	Dates business existe	ed
		City	State	Zip Code		or account	ant of bookkee	pei	FromTo	
					Descr	ribe the natu	ire of the busin	ess	Employer Identification include Social Securi	
		Business Name			_   _				EIN:	
		Number Street			— Name	of account	ant or bookkee	per	Dates business existe	ed
		City	State	Zip Code	_				From To _	

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Debt	tor 1 Ruth			Chambers	Case number (if known)
	First Na	ne	Middle Name	Last Name	<u> </u>
28.		ears before you or other parties		ou give a financial statemen	t to anyone about your business? Include all financial institutions,
		ill in the details	below.		
				Date issued	
	Name			MM/DD/YYYY	
	Num	per Street		_	
	City	S	tate Zip Code	_	
Part	12: Sign	Below			
t	rue and co	rect. I understa	and that making a false sta	tement, concealing propert	nts, and I declare under penalty of perjury that the answers are y, or obtaining money or property by fraud in connection with 0 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		<b>★</b> /s/ Ruth	n Chambers		*
		Signature of			Signature of Debtor 2
		Date 8/6/2	2018		Date
	Did you atta	ch additional p	ages to Your Statement of	Financial Affairs for Individu	uals Filing for Bankruptcy (Official Form 107)?
<u> </u>	<b>√</b> No				
	Yes				
	Did you pay	or agree to pay	someone who is not an at	torney to help you fill out ba	ankruptcy forms?
	<b>✓</b> No				
	Yes. Na	ne of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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mation to identify your c	ase:			
Ruth		Chambers		
First Name	Middle Name	Last Name		
First Name	Middle Name	Last Name		
Sankruptcy Court for the:	Northern	District of Illinois		
		(State)		
	Ruth First Name	First Name Middle Name  First Name Middle Name		

Check if this is an amended filing

### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1.	For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.					
	Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?			
	Creditor's name: Santander Consumer USA  Description of property securing debt: 2012 Nissan Sentra	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and	No. ✓ Yes.			
	Creditor's name: SYNCB/ASHLEY HOMESTORE  Description of property securing debt: Furniture	✓ Surrender the property.  ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]:	✓ No. Yes.			
	Creditor's name:  Description of property securing debt:	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and	No. Yes.			
	Creditor's name:  Description of property securing debt:	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and	No. Yes.			

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e an unexpired persona	al property lease if the truste	e does not assume it. 11	U.S.C. § 365(p)(2).	
scribe your unexpired	personal property leases			Will the lease be assumed?
ssor's name:				☐ No ☐ Yes
scription of leased operty:				
ssor's name:				☐ No ☐ Yes
scription of leased operty:				
ssor's name:				□ No □ Yes
scription of leased operty:				
ssor's name:				☐ No ☐ Yes
scription of leased operty:				
ssor's name:				☐ No ☐ Yes
scription of leased operty:				_
ssor's name:				☐ No ☐ Yes
scription of leased operty:				_
ssor's name:				□ No □ Yes
scription of leased operty:				
Sign Below				
	declare that I have indicated an unexpired lease.	d my intention about any	property of my estate th	nat secures a debt and any personal

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B2030 (Form 2030) (12/15)

### **UNITED STATES BANKRUPTCY COURT**

		Northern Distric	ct of Illinois	
n re	Ruth Chambers		Case No.	
_	Debtor			(If known)
			Chapter	Chapter 7
	DISCLOSURE OF	COMPENSATIO	N OF ATTORNEY I	OR DEBTOR
1	. Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behalf	year before the filing of the	petition in bankruptcy, or agreed	to be paid to me, for services
	For legal services, I have agreed to ac	ocept		\$1,765.00
	Prior to the filing of this statement I I	nave received		\$0.00
	Balance Due			\$1,765.00
2	. The source of the compensation paid	d to me was:		
	<b>✓</b> Debtor	Other (specify)		
3	. The source of the compensation paid	d to me is:		
	<b>✓</b> Debtor	Other (specify)		
4	I have not agreed to share the ab	ove-disclosed compensation aw firm.	n with any other person unless th	ey are
		w firm. A copy of the agreeme	th a other person or persons who ent, together with a list of the nan	
5	. In return for the above-disclosed fee	, I have agreed to render lega	I service for all aspects of the bar	kruptcy case, including:
	<ul> <li>a. Analysis of the debtor's finan bankruptcy;</li> </ul>	ıcial situation, and rendering	advice to the debtor in determini	ng whether to file a petition in
	b. Preparation and filing of any	petition, schedules, statemer	nts of affairs and plan which may	be required;
	c. Representation of the debtor	at the meeting of creditors a	nd confirmation hearing, and any	adjourned hearings thereof;
6	. By agreement with the debtor(s), the	above-disclosed fee does no	ot include the following services:	
		CERTIFIC	ATION	
	I certify that the foregoing is a complet tor(s) in this bankruptcy proceedings.	te statement of any agreemer	nt or arrangement for payment to	me for representation of the
	8/6/2018		/s/ David Strahorn	
	Date		Signature of Attorney	
			Semrad Law Firm	
			Name of law firm	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

### **Chapter 7: Liquidation**

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+ \$75		administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans.
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc">http://www.justice.gov/ust/eo/hapcpa/ccde/cc</a> approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Chambers, Ruth	Case No	
	Debtor(s)		
		Chapter.	Chapter7
	VERIFIC	CATION OF CREDITOR MATE	RIX
Th knowledge		y that the attached list of creditors is tru	e and correct to the best of their
Date:	8/6/2018	/s/ Chambers, Rui Chambers, Ruth Signature of Debte	

Santander Consumer USA ATT POC: Janiscia Jackson PO Box 961245 Fort Worth, TX, 76161

ONEMAIN P.O. Box 742536 Cincinnati, OH, 45274

CHASE CARD BANK ONE CARD SERV 2500 WESTFIELD DRI ELGIN, IL, 60124

SYNCB/ASHLEY HOMESTORE 7780 S Cicero Ave Burbank, IL, 60459

TD BANK USA/TARGETCRED PO Box 660170 Dallas, TX, 75266

SYNCB/WALMART Po Box 530927 Atlanta, GA, 30353

KOHLS/CAPONE PO BOX 3115 MILWAUKEE, WI, 53201

COMENITY BANK/LNBRYANT 4590 E Broad St Columbus, OH, 43213

SYNCB/CARE CREDIT C/O P.O. BOX 965036 ORLANDO, FL, 32896

SYNCB/SAMS CLUB Po Box 960013 Orlando, FL, 32896

SYNCB/JCP PO BOX 965007 Orlando, FL, 32896 COMENITY BANK/CARSONS 1314 PINELOG ROAD AIKEN, SC, 29803

CAP1/DBARN PO Box 30285 Salt Lake City, UT, 84130

MIDNIGHT VELVET PO Box 740933 Dallas, TX, 75374 Case 18-22040 Doc 1 Filed 08/06/18 Entered 08/06/18 13:32:08 Desc Main Document Page 60 of 69

#### THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28<sup>th</sup> Floor Chicago, IL 60603 (312) 913-0625

Thank you for selecting The Semrad Law Firm LLC (the "Firm") as legal counsel. It is our policy to confirm in writing the terms of our engagement, including the scope of our representation and how we will charge for our legal services. Those terms are set forth below.

- Scope of Representation. The Firm will be representing you in all aspects of your Bankruptcy case filed under Chapter 7 of the United Stated Bankruptcy Code except for any adversary proceedings that may be filed against you. The scope of this representation does not include any other civil or criminal proceedings.
- 2. Conditional Representation. The Firm has agreed to represent you on the condition that you will enter into and sign an agreement after the filing of your bankruptcy case to pay the Firm for services rendered after the filing of your case. If you refuse to enter into and sign the agreement within ten (10) days after the filing of your case, the Firm will file a motion to withdraw from representing you.
- 3. Prepetition Fees.
  - a. **Before** the case is filed, the Firm agrees to:
    - Personally counsel you regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures as well as nonbankruptcy options, and answer your questions;
    - ii. Personally explain to you that the Firm is being engaged to represent you on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees are determined and paid;
    - Personally review with you and sign the completed petition, statements, and schedules;
    - iv. Timely prepare and file your petition, statements, and schedules,
    - v. Advise you on which creditors you will need to continue to pay, such as housing or vehicle payments that you intend to retain.
  - b. The fee for services provide before the case is filed is \$0.00.
  - c. The Firm may also incur costs for such items as credit reports and tax transcripts for which it will <u>not</u> seek reimbursement.
- 4. Post-Petition Fees.
  - a. After the case is filed, the Firm agrees to:
    - i. Advise you of the requirement to attend the meeting of creditors and notify you of the date, time, and place of the meeting;

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[Type here]

- ii. Advise you of the requirement to attend a debtor education course and provide a certificate of completion to the Firm;
- iii. Send notice of your case filing to creditors;
- iv. Correspond with creditors regarding any matters necessary for the administration of your case, including to cease payroll garnishments, unfreeze bank accounts, or recover property that was improperly seized by a creditor;
- v. Timely submit to the Chapter 7 trustee properly documented proof of income, tax records as well as any other necessary documentation;
- vi. Provide you with knowledgeable legal representation at the meeting of creditors as well as any continued or rescheduled meetings in time for check-in and examination;
- vii. Timely prepare and file the notice of completion of the debtor education course;
- viii. If the Firm will be employing another attorney to attend the meeting of creditors, personally explain to you, in advance, the role and identity of the other attorneys and provide that attorney with your file in sufficient time to review it and properly represent you at the meeting;
- ix. Timely negotiate with the Trustee regarding any property or actions that the Trustee may pursue that could be adverse to your interests;
- x. Timely prepare, file, and serve any necessary statements, amended statements, amended schedules and any change of address, in accordance with information provided by you;
- xi. Monitor all incoming case information, including but not limited to, Reaffirmation agreements, notice of audits by the US Trustee, correspondence from you or any interested parties;
- xii. Review and negotiate, if necessary, any reaffirmation agreements and personally explain the terms of said agreements to you;
- xiii. Be available to respond to your questions throughout the term of the case;
- xiv. Review and timely respond, if necessary, to Trustee motions to dismiss the case;
- xv. Review and timely respond, if necessary, to motions for relief from stay;
- xvi. Prepare, file, and serve all appropriate motions to avoid liens;
- xvii. Prepare, file, and serve all appropriate motion to redeem;
- xviii. Send In Re Mendiola letters to previously undisclosed creditors; and
- xix. Provide any other legal services necessary for the administration of the case.
- b. The fee for services provide after the case is filed is \$2100.00.
- c. The firm will have no right to payment of the fee listed in section 4(b) unless you sign an agreement after the filing of your bankruptcy case to pay the Firm for services rendered after the filing of your case.

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[Type here]

- d. After the case is filed, the Bankruptcy Court will require payment of filing fees in the amount of \$335.00. In order to pay this, you have two (2) options (please circle one):
  - i. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or

20

- ii. Request that the Firm pay the costs on your behalf for which it will seek reimbursement from you;
- 5. Retainers and Payments to the Firm.
  - a. The fee being charged to you is a flat fee for services rendered during the Chapter 7 case and will be applied without the need for the Firm to keep detailed time records for the specific services performed.
  - b. Any funds paid to the Firm shall immediately become property of the Firm and will be deposited into the operating account of the Firm and will be used for general expenses of the firm.
  - c. While it is ordinarily your option to deposit funds with an attorney that shall remain your property as security for future services, the Firm does not represent clients under such a security retainer because bankruptcy cases require many disparate tasks and functions for the attorneys and support staff; some of which require legal expertise while others may only be ministerial in nature. The benefit to you is the firm's commitment to perform any and all work necessary to represent you in this Chapter 7 bankruptcy.
- 6. Right to Hire New Counsel. You always have the right at any time to terminate the Firm's representation and hire new counsel. Should you refuse to sign an agreement after the filing of your bankruptcy case to pay the Firm for services rendered after the filing of your case, and the Firm moves to withdraw from representing you, you are strongly encouraged to hire new counsel.
- 7. Conflict Waiver. There is an inherent conflict wherever attorneys represent debtors in bankruptcy for a fee. The Firm is working to alleviate financial issues, while at the same time charging a fee. There have also previously been cases that questioned whether asking you to sign an agreement after the filing of your bankruptcy case to pay the Firm for services rendered after the filing of your case presents a possible additional conflict of interest. The Firm may only represent you if that representation will not be materially limited by the Firm's own interests. We believe our ability to represent you will not be affected by your ongoing obligation to pay our post-petition fee. By signing this agreement, you are waiving this conflict and are allowing us to represent you. You

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[Type here]

do not have to waive this conflict of interest and can instead choose for the Firm not to represent you. You also have the right to consult separate counsel to discuss whether you should waive this conflict.

8. Merger. This agreement constitutes the entire agreement between you and the Firm. Any previous discussions or agreements are not valid or enforceable unless contained in this document.

Very truly Yours,

Attorney, The Semrad Law Firm

CONFIRMED:

Auth Chambers

Client

Date

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Debtor 1 Ruth First Name		mbers Case nu	umber (if known)		
A STREET STREET	estions for Reporting Purposes	Name			
16. What kind of debts do you have?	nd of debts do				
17. Are you filing under Chapter 7?  Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?  No. I am not filing under Chapter 7. Go to line 18.  ✓ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?					
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000		
19. How much do you estimate your assets to be worth?		\$1,000,001-\$10 mi \$10,000,001-\$50 m \$50,000,001-\$100 \$100,000,001-\$50	nillion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion		
20. How much do you estimate your liabilities to be?  Part 7: Sign Below		\$1,000,001-\$10 mi \$10,000,001-\$50 m \$50,000,001-\$100 \$100,000,001-\$50	million \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion		
	I have examined this netition, and	I declare under penalty of r	perjury that the information provided is true ar	nd	
For you	correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, of title 11, United States Code. I understand the relief available under each chapter, and I choose to proce under Chapter 7.  If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years			or 13 ed fill	
	both. 18 U.S.C. §§ 152, 1341, 15	19, and 3571.	220,000, or imprisorning it for up to 20 years	, Oi	
	/s/ Ruth Chambers Kuth Signature of Debtor 1	Chambere X	Signature of Debtor 2		
	Executed on 8/6/2018 Executed on MM / DD / YYYYY		Executed on		

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Fill in this infor	Fill in this information to identify your case:					
Debtor 1	Ruth		Chambers			
	First Name	Middle Name	Last Name			
Debtor 2				_		
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		Northern	District of Illinois (State)	-		
Case number (If known)			(5.00)	_		

### Official Form 106Dec

Check if this is an amended filing

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Part 1: Sign Below	
Did you pay or agree to pay someone who is NOT an attorney	y to help you fill out bankruptcy forms?
<b>✓</b> No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the summ	nary and schedules filed with this declaration and
that they are true and correct.	
* /s/ Ruth Chambers. Littl Chambers	*
Signature of Debtor 1	Signature of Debtor 2
Date 8/6/2018	Date
MM/DD/YYYY	MM/DD/YYYY

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28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutoreditors, or other parties.    No	Debtor 1			Chambers	Case number (if known)
Creditors, or other parties.  No Yes. Fill in the details below.  Date issued  Name  Number Street  City State Zip Code  Part 12: Sign Below  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers at true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.   **  /s/ Ruth Chambers Ruth Ambers Signature of Debtor 1  Date 8/6/2018  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filling for Bankruptcy (Official Form 107)?  No Yes. Name of person  Attach the Bankruptcy Petition Preparer's Notice,		First Name	Middle Name	Last Name	
Date issued    Name		editors, or other partic	es.	you give a financial stater	nent to anyone about your business? Include all financial institutions,
Number Street  City State Zip Code  Part 12: Sign Below  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers a true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §\$ 152, 1341, 1519, and 3571.   **  **  **  **  **  **  **  **  **		Tes. Fill in the details	s below.		
Number Street  City State Zip Code  Part 12: Sign Below  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers at true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.   **  /s/ Ruth Chambers Auch Chambers  Signature of Debtor 1  Date 8/6/2018  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filling for Bankruptcy (Official Form 107)?  No  Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?  No  Yes. Name of person  Attach the Bankruptcy Petition Preparer's Notice,				Date issued	
City State Zip Code  Part 12: Sign Below  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers at true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.   ***  //s/ Ruth Chambers Acath Chambers Signature of Debtor 1  Date Date  Date  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?  Attach the Bankruptcy Petition Preparer's Notice,		Name		MM/DD/YYYY	_
City State Zip Code  Part 12: Sign Below  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers at true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.   ***  //s/ Ruth Chambers Acath Chambers Signature of Debtor 1  Date Date  Date  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?  Attach the Bankruptcy Petition Preparer's Notice,					
I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers at true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.   **  /s/ Ruth Chambers **  Signature of Debtor 1  Date 8/6/2018  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No  Yes  Pics Name of person  Attach the *Bankruptcy Petition Preparer's Notice,*		Number Street		_	
I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers at true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.   **  /s/ Ruth Chambers **  Signature of Debtor 1  Date 8/6/2018  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No  Yes  Pics Name of person  Attach the *Bankruptcy Petition Preparer's Notice,*		City	State Zin Code	<u> </u>	
I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers at true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.   **  /s/ Ruth Chambers			otate Zip code		
I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers at true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.     Signature of Debtor 1	Part 12	Sign Below			
Date 8/6/2018  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?  No Yes. Name of person  Attach the Bankruptcy Petition Preparer's Notice,	a ba	<b>★</b> /s/ Ru	uth Chambers Ruth		×
Date 8/6/2018  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?  No Yes. Name of person  Attach the Bankruptcy Petition Preparer's Notice,		Signature	e of Debtor 1		Signature of Debtor 2
✓ No  Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?  ✓ No  Yes. Name of person  Attach the Bankruptcy Petition Preparer's Notice,		Date 8/6	6/2018		Date
Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?  No  Yes. Name of person  Attach the Bankruptcy Petition Preparer's Notice,	Did	you attach additional	pages to Your Statement	of Financial Affairs for Ind	ividuals Filing for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?  No  Yes. Name of person  Attach the Bankruptcy Petition Preparer's Notice,		No			
✓ No  Yes. Name of person  Attach the Bankruptcy Petition Preparer's Notice,		Yes			
Yes. Name of person  Attach the Bankruptcy Petition Preparer's Notice,	Did	you pay or agree to pa	ay someone who is not an	attorney to help you fill ou	ut bankruptcy forms?
		- No			
	H	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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or H			Chambers	Case number (if		
F	First Name	Middle Name	Last Name	known)		
a Li	ist Your Unexpired	d Personal Property Leas	es			
matio	on below. Do not list	operty lease that you listed in real estate leases. Unexpired property lease if the trustee	d leases are leases that	Contracts and Unexpired Leases (Official Form 106G), fill in th are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).		
Descr	ribe your unexpired p	ersonal property leases	Will the lease be assumed?			
Lesso	or's name:			□ No □ Yes		
Descri	iption of leased erty:			_		
_esso	or's name:			□ No □ Yes		
Descri	iption of leased erty:					
.esso	or's name:			□ No □ Yes		
Descri	iption of leased erty:					
_esso	or's name:			□ No □ Yes		
Descri	ription of leased erty:			<del></del>		
Lesso	or's name:			No Yes		
Descr	ription of leased erty:					
Lesso	or's name:			□ No □ Yes		
Descr prope	ription of leased erty:					
_essc	or's name:			□ No □ Yes		
Descr prope	ription of leased erty:			<u> </u>		
2, 6	Sign Below	thanki ka menuhi organi kaku arabi masi ilak ash bilandah ka kinda kenda arabi ash arabi an karabi ke menuhi	Valville saltise and the recommendation is along the retrieve and other section of the account			
nder			I my intention about any	property of my estate that secures a debt and any personal		
_		0 7/2/1 /	4.0			
	s/ Ruth Chambers // nature of Debtor 1	Suth Chamber	∑ ¥ Si	gnature of Debtor 2		
Dat	te 8/6/2018 MM/DD/YYYY		Da	ate		

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### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Chambers, Ruth  Debtor(s)	Case No	Case No				
		Chapter.	C	hapter7			
	VERIFICA	TION OF CREDITO	OR MATRIX				
T knowledg	The above named Debtors hereby verify thge.	at the attached list of cre	ditors is true and corr	ect to the best of their			
Date:	8/6/2018	Ch	Chambers, Ruth Luc ambers, Ruth inature of Debtor	th Chambers			
				er sære e e eræ er			

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Debtor 1			Chambers	Case number	(if known)			
	First Name	Middle Name	Last Name	Column A Debtor 1		Column B Debtor 2 or non-filing spou	se	
Do no	nployment compensat of enter the amount if you re the Social Security Act.	ou contend that the amoun	t received was a benefit	\$0.00		-		
For yo	our spouse		\$1,626.00 \$0.00					
	on or retirement inco	me. Do not include any am	ount received that was a	\$ <u>0.00</u>				
10. <b>Inco</b> amou paym intern	me from all other sou int. Do not include any ents received as a victin	rces not listed above. Spe benefits received under the n of a war crime, a crime ag orism. If necessary, list othe	Social Security Act or ainst humanity, or					
Total	amounts from separate	pages, if any.		+\$0.00	7 1	+	_ 	
11. Cal each	culate your total curr	ent monthly income. Add	lines 2 through 10 for	\$0.00	+		_  =	\$0.00
	umn. Then add the tota	I for Column A to the total	or Column B.					
								otal current onthly income
		er the Means Test App						
		onthly income for the year monthly income from line 1	10 17 10 10 10 10 10 10 10 10 10 10 10 10 10		Copy li	ne 11 here →		\$0.00
	Multiply by 12 (the nun	nber of months in a year).						X 12
12b.	The result is your annua	al income for this part of the	e form.				12b.	\$0.00
13 Calc	ulate the median fami	ly income that applies to	you. Follow these steps:					
Fill in	the state in which you	live.	Illinois					
Fill in	the number of people i	n your household.	1				7	The second second second second
	the median family incorehold.	me for your state and size o	f				13	52,410.00
instru	ctions for this form. Th	edian income amounts, go is list may also be available						
	do the lines compare							
14a.	Line 12b is less that Go to Part 3.	an or equal to line 13. On the	ie top of page 1, check b	ox 1, There is no presumpt	tion of ab	use.		
14b.		nan line 13. On the top of p ll out Form 122A-2.	page 1, check box 2, The	presumption of abuse is d	etermined	l by Form 122A-2	2.	
Part 3:	Sign Below							
Ву	signing here, I declare u	nder penalty of perjury that	the information on this st	atement and in any attachr	nents is t	rue and correct.		
	/s/ Ruth Chambers Signature of Debtor 1	Ruth Chr.	mbere.	Signature of Debtor 2				
I	Date 8/6/2018 MM/DD/YYYY			Date 8/6/2018 MM/DD/YYYY				
		do NOT fill out or file Form fill out Form 122A-2 and fil						